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CONFIRMATION NO. 5400

Bib Data Sheet

SERIAL NUMBER 09/314,566	FILING DATE 05/19/1999 RULE	CLASS 370	GROUP ART UNIT 2666	ATTORNEY DOCKET NO. 82771.P286
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## APPLICANTS

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Yes  
\*\* CONTINUING DATA \*\*\*\*\* MM  
This appln claims benefit of 60/086,078 05/20/1998

None  
\*\* FOREIGN APPLICATIONS \*\*\*\*\* MM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 06/11/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance met <i>Michael J. More</i> MM Examiner's Signature Initials	STATE OR COUNTRY NH	SHEETS DRAWING 5	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 6
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TITLE  
METHOD AND APPARATUS FOR DISCARDING DATA PACKETS THROUGH THE USE OF DESCRIPTORS

FILING FEE RECEIVED 1124	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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